OSFM Plan Review #	
(To be completed by OSFM)	

## **OSFM PLAN SUBMITTAL FORM**

## **PROJECT INFORMATION**

Name of Project	::			
Address of Proje	ect:			
City:	ZI	IP Code	County:	
SUBMITTER 1	<u>INFORMATION</u>			
Submitter's Nar	ne:			
Company Name	»:			
Address:			City:	
Zip:	Telephone:		Email:	
Remodeling To Ch		ling: upancy classific ncy classification	n from that of the	recent occupancy most recent occupancy.
Occupancy Cla Ambulator Assembly Apartment Business Day Care Day Care	essification as definitely Health Care EBuilding Center	ned in NFPA 10  Detention Hotel Dormiton Industria Lodging Mercanti	the content of the co	Residential Board & Care Storage 
Number of Sto	<u>ries</u>	Four $\square$ > Fo	ur 🗌 "High rise'	

Construction Classif			
	Type II(222)		
	Type II(111)		Type V(000)
-	Type II(000)	Type IV(2HH)	
provide construction	n classification per the	International Buildin	g Code or BOCA Code:
ill the building be p	protected by an autom	atic fire sprinkler sy	stem?:
No			
Only partially i	in some areas or rooms	. Please specify sprin	klered areas:
<u> </u>	which the sprinkler sys		:
□NFPA 13	□NFPA 13R	□NFPA 13D	
Will the building be	protected by an autor	natic fire alarm syst	<u>em?:</u>
□No			
, ,	ome areas or rooms:  Ify:		
r rease speer			
Yes			
Will kitchen cooking No Yes If yes, will the sys	g fire suppression systems comply with NFI	ems be included in t	
Will kitchen cooking No Yes	g fire suppression systems comply with NFI	ems be included in t	
Will kitchen cooking  ☐ No Yes ☐ If yes, will the sys ☐ Yes ☐ N	stems comply with NFI	ems be included in t	he building?:
Will kitchen cooking  ☐ No Yes ☐ If yes, will the sys ☐ Yes ☐ N	g fire suppression systems comply with NFI	ems be included in t	he building?:
Will kitchen cooking No Yes If yes, will the sys Yes I food services are pro	stems comply with NFI No evided for occupants, is	ems be included in to PA 96? In the cooking onsite of	he building?: r will food be catered?
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Provide a description of the proje	ect to help us understand what you a	re proposing:
depending upon the size of the is not permitted to use links to	nitted in PDF format via email (ne attachments) to SFM.Techservice view stored plans in clouds or or is preferred, please send an emaing.	ces@illinois.gov. OSFM ther similar types of
Signature of Submitter	Printed Name	Date